



Wisconsin Department of Agriculture, Trade and Consumer Protection
Bureau of Weights & Measures Permit & Licensing Section
P.O. Box 7837
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FOR OFFICE USE ONLY

Wis. Admin. Code §ATCP 93.115

PRE-CONSTRUCTION UST/PIPE INSTALLATION

Return completed form to the address above. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)].

FACILITY IDENTIFICATION: (Please Print)

INSTALLATION NAME		COUNTY	
INSTALLATION STREET ADDRESS (Not PO Box)		<input type="checkbox"/> CITY <input type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE:	STATE ZIP
OWNER LEGAL NAME	COUNTY	TELEPHONE: () -	E-MAIL ADDRESS
OWNER STREET ADDRESS		<input type="checkbox"/> CITY <input type="checkbox"/> TOWN <input type="checkbox"/> VILLAGE:	STATE ZIP
Installation Contractor Company Name:	Lead Contractor Contact Person:		Lead Inspector Name:
Installation Contractor Street Address:	Contact Telephone:	Cell:	Contact Telephone: Cell:
City, State, Zip:	Secondary Contractor Contact Person:		Secondary Inspector Contact Name:
Company Telephone No.:	Contact Telephone:	Cell:	Contact Telephone: Cell:

TANK CONSTRUCTION

State plan number/LPO plan number is: _____

Tank is new and carries UL or other national testing label. – Listing Org. & Number: _____

Tank is used, but has been recertified to meet the EPA new tank standard – Recert by: _____

Tank corrosion protection via: ☐ Fiberglass ☐ Composite tank
Pipe corrosion protection via: ☐ Fiberglass ☐ Non corrosive material: ☐ Coating ☐ Polymer piping

TANK HANDLING AND TESTING

Pre installation test of double-walled tank: in accordance with manufacturer's specifications and ATCP 93 adopted standards. Use TR-WM-138 Checklist for Underground Tank/Pipe Installation. ☐ Yes ☐ No ☐ NA

TANK SITE AND BACKFILL

Installation is in an area of high water table or subject to flooding and tank is anchored or over-burden calculations furnished. ☐ Yes ☐ No ☐ NA

Excavation is in a bog, swampy area or landfill and a filter fabric was used to prevent the migration of the backfill material. ☐ Yes ☐ No ☐ NA

Backfill for composite, fiberglass clad steel, or fiberglass- tank is clean, washed, well granulated sand, crushed rock, or is pea gravel naturally round with minimum diameter of 1/8 inch and maximum size of 3/4 inch, or crushed rock or gravel between 1/8 and 1/2 inch in size. ☐ Yes ☐ No ☐ NA

PIPING TYPE

☐ Pressurized piping with ☐ auto shutoff, ☐ alarm or ☐ flow restrictor. Will any piping be manifolded? ☐ Yes ☐ No

☐ Suction piping with check valve at pump and inspectable. ☐ Suction piping with check valve at tank.

Flexible connectors are used at the top of tank, between tank and vent pipe, below the dispenser and also where less than 4 feet of run exists between changes in direction with fiberglass piping. ☐ Yes ☐ No ☐ NA

PRIMARY LEAK DETECTION (Check which applies under both TANK and PIPING)

Tank

☐ Automatic tank gauging ☐ Interstitial monitoring ☐ Manual tank gauging (only for tanks of 1,000 gallons or less)

Piping (pressurized or suction with check valve at tank) Pipe installation is: ☐ single wall, ☐ double walled.

☐ Automatic line leak detectors ☐ Interstitial monitoring

Equipment matches the plan review. ☐ Yes ☐ No Note discrepancies and resolution in Comment Section

Pre-installation Scope and Planning Meeting Expectations

- 1) Administrative aspects and how contractor will verify and document integrity and diagnostic tests, e.g., sump containment tightness, system leak detection, corrosion protection, overfill alarm, etc.
- 2) Verify that system is being installed within the restrictions of the respective Material Approval or Petition For Variance.
- 3) Verify tank, dispenser and emergency control locations and setbacks as reflected on the plan.
- 4) Potential plan revision items.
- 5) Agree on notification / inspection time parameters, flexibility, etc.
- 6) Third-party contractors that may be involved, e.g., fencing contractor, tightness tester, etc. Areas of the installation that are not under the responsibility of the tank system equipment contractor, e.g., electrical.
- 7) Who will be attending final inspection and what must be accessible and available.

COMMENTS: _____

INSPECTOR INFORMATION

Inspector Signature: _____ Inspector Cert. #: _____ LPO Agency #: _____

Fire department providing coverage: _____ FDID #: _____

Contractor Signature: _____ Cert. #: _____ Date Signed: _____